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## APPLICANTS

Carol Maurer, Gold Hill, OR;

Robert T. Leedle, Hemet, CA;

\*\* CONTINUING DATA \*\*\*\*\*

*None TN*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None TN*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 6	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials <i>W</i>				

## ADDRESS

08791  
 BLAKELY SOKOLOFF TAYLOR & ZAFMAN  
 12400 WILSHIRE BOULEVARD  
 SEVENTH FLOOR  
 LOS ANGELES, CA  
 90025-1030

## TITLE

Garden hoe

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